

INNOVATIVE PARTNERSHIP FOR ACTION AGAINST CANCER (iPAAC)



GENERAL INFORMATION



- The Innovative Partnership for Action Against Cancer (iPAAC) Joint Action, which
 has been selected for funding under the Third Health Programme (2014–2020),
 brings together 44 partners from 24 European countries.
- It aims to build upon the outcomes of previous EPAAC and CANCON Joint Actions and is coordinated by the National Institute of Public Health of the Republic of Slovenia (NIJZ).
- The iPAAC Joint Action has officially started on 1st April 2018 and will last for three years.

iPAAC BUDGET:

5.625.000 EUR

4.500.000 EUR co-funding by EC (80 %)



iPAAC STRUCTURE



Innovative Partnership for Action Against Cancer (iPAAC) is the third consecutive Joint Action dedicated to cancer control.

IPAAC WORK PACKAGES:

WP 1 – Coordination

National Institute of Public Health of Slovenia (NIJZ)

WP 2 – Dissemination

Institute of Health Information and Statistics of the Czech Republic (UZIS)

WP 3 – Evaluation

Croatian National Institute of Public Health (HZJZ)

WP 4 – Integration in National Policies and Sustainability

Belgian Cancer Centre, Sciensano (SC)



iPAAC STRUCTURE



WP 5 – Prevention and Screening

Cancer Society of Finland (CSF)

WP 6 – Genomics in Cancer Control and Care

Belgian Cancer Centre, Sciensano (SC)

WP 7 – Cancer Information and Registration

Italian National Institute of Public Health (ISS)

WP 8 – Challenges in Cancer Care

Catalan Institute of Oncology (ICO)

WP 9 – Innovative Therapies in Cancer

French National Institute of Cancer (INCa)

WP 10 – Governance of Integrated and Comprehensive Cancer Care

German Federal Ministry of Health and German Cancer Society (DKG)



IPAAC PARTNER COUNTRIES







iPAAC PARTNERS – COMPETENT AUTHORITIES



1. (Coordinator)	National Institute of Public Health of the Republic of Slovenia (NIJZ)	Slovenia
2.	Sciensano (SC)	Belgium
3.	National Center of Public Health and Analyses (NCPHA)	Bulgaria
4.	Croatian Institute of Public Health (CIPH)	Croatia
5.	Ministry of Health of the Republic of Cyprus (MOH)	Cyprus
6.	Institute of Health Information and Statistics of the Czech Republic (UZIS)	Czech Republic
7.	National Institute for Health and Welfare (THL)	Finland
8.	French National Cancer Institute (INCA)	France
9.	Federal Ministry of Health (BMG)	Germany
10.	7th Health Region of Crete (7 HRC)	Greece
11.	National Institute of Oncology (OOI)	Hungary
12.	Department of Health (DoH)	Ireland



iPAAC PARTNERS – COMPETENT AUTHORITIES



13.	National Institute of Health (ISS)	Italy
14.	Ministry of Health of the Republic of Lithuania (SAM)	Lithuania
15.	Ministry for Health – Government of Malta (MFH)	Malta
16.	Institute of Oncology of the Republic of Moldova (IMSP IO)	Moldova
17.	National Institute for Public Health and The Environment (RIVM)	Netherlands
18.	Oslo University Hospital (OUS)	Norway
19.	National Institute of Public Health – National Institute of Hygiene (NIZP – PZH)	Poland
20.	Ministry of Health of Portugal (MS)	Portugal
21.	National Institute of Public Health (INSP)	Romania
22.	Institute of Public Health of Serbia "Dr Milan Jovanović Batut" (IPHS)	Serbia
23.	Biomedical Research Center of the Slovak Academy of Sciences (BMC SAS)	Slovakia
24.	Catalan Institute of Oncology (ICO)	Spain



iPAAC PARTNERS – AFFILIATED ENTITIES



1.	Institute of Oncology Ljubljana (OIL)	Slovenia
2.	Masaryk University (MUNI)	Czech Republic
3.	Cancer Society of Finland (CSF)	Finland
4.	German Cancer Research Center (DKZF)	Germany
5.	German Cancer Society (DKG)	Germany
6.	 Technical University Dresden (TU Dresden) Chair of Information Systems, esp. Systems Development Centre for Evidence-based Healthcare 	Germany
7.	University Medicine Köln (UK Köln)	Germany
8.	Italian Ministry of Health (MoH)	Italy
9.	Vilnius University Hospital Santaros Klinikos (VUHSK)	Lithuania
10.	"Marius Nasta" Pneumophtisiology Institute (IPMN)	Romania
11.	Oncology Institute "Prof. Dr. Ion Chiricuţă" (IOCN)	Romania



iPAAC PARTNERS – AFFILIATED ENTITIES



12.	Emergency Clinical County Hospital Craiova (CCHC)	Romania
13.	Clinical Centre of Kragujevac (CCK)	Serbia
14.	Faculty of Medicine, University of Belgrade (UBEO)	Serbia
15.	Institute for Oncology and Radiology of Serbia (IORS)	Serbia
16.	Public Health Institute Niš (IPHN)	Serbia
17.	Institute of Public Health of Vojvodina (IPHV)	Serbia
18.	Oncology Institute of Vojvodina (IOV)	Serbia
19.	Provincial Secretariat for Health Care (APV)	Serbia
20.	Foundation for the Promotion of Health and Biomedical Research of Valencia Region (FISABIO)	Spain

TARGET GROUP



The primary target group of the iPAAC Joint Action will be policymakers at the EU level and decision makers at the national, regional and local level.

All of the innovative actions covered by the JA work packages will be assessed on the basis of sustainability and integration into national policies.

GENERAL OBJECTIVE OF THE IPAAC JOINT ACTION



The general objective of the iPAAC Joint Action (JA) is to develop innovative approaches to advances in cancer control.

The development of innovative approaches to cancer control will be supplemented by a Roadmap on Implementation and Sustainability of Cancer Control Actions, which will support Member States in implementation of iPAAC and CANCON recommendations.

Roadmap on Implementation and Sustainability of Cancer Control Actions is the key deliverable of the Joint Action.



SPECIFIC OBJECTIVES



- To develop and produce the Roadmap on Implementation and Sustainability of Cancer Control Actions.
- 2. To reinforce prevention of cancer through further development of the European Code Against Cancer and population-based screening programmes.
- 3. To develop a comprehensive approach to the use of genomics in cancer control and care.
- 4. To pilot the integration of population-based cancer registry datasets with clinical and administrative data to derive key indicators on cancer care pathway and health-related costs in selected European countries or regions and to deliver informative epidemiological indicators on cancer prevalence by country in Europe.



SPECIFIC OBJECTIVES



- 5. To define strategies to improve the quality of cancer care by optimising the use of healthcare resources and promoting realistic and evidence-based responses to existing needs.
- 6. To map recommendations and best practice guidelines for specific immunotherapies, to anticipate and predict impact of new specific immunotherapies before their marketed authorisation and to follow specific immunotherapies after their marketed authorisation.
- 7. To develop practical instruments to support Member States in successful governance of cancer care, ensuring standardised, integrated and comprehensive oncological care that is tumour-specific and delivers all-encompassing high-quality care to all patients.

iPAAC OUTCOMES



Support for Member States in implementing recommendations from the CANCON Joint Action at national, regional and local levels.

Reinforcing of cancer prevention through a review of *current* recommendations for cancer screening and a sound assessment of the potential that might exist for the introduction of possible new screening programmes, through a critical evaluation and assessment of the impact the activities in the field of *genomics* may have on improving cancer control both at the population level and through assessment of the implementation and potential modifications of the *European Code Against Cancer*.



iPAAC OUTCOMES



- Providing better efficacy for dealing with neglected cancers through development of new key indicators to assess clinical patient pathways and health care related costs of cancer and its interventions, particularly in the case of pancreatic cancer.
- Supporting the introduction of immunotherapies into clinical practice through a comprehensive assessment of immunotherapies and their effectiveness.
- Evaluation of cancer care in European countries through an assessment of quality indicators.
- Support for policymakers in the field of governance, including pilot comprehensive cancer care networks and an updated analysis of national cancer control programmes in the EU.



CONTACTS



Project management team

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